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I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: March 29, 2005

Signature:

*Shawn P. Foley*  
(Shawn P. Foley)

Docket No.: LOREAL 3.0-039  
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
Fares, et al.

Application No.: 10/646,300

Filed: August 22, 2003

For: COMPOSITIONS CONTAINING TOPICAL  
ACTIVE AGENTS AND PENTYLENE  
GLYCOL

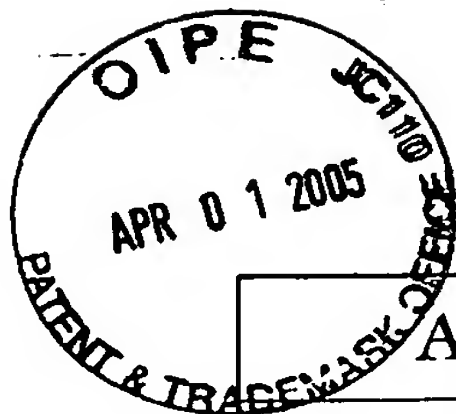
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: Group Art Unit: 1617  
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: Examiner: Williams,  
Leonard M.  
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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT

Dear Sir:

In response to the official action mailed January 11, 2005, applicant submits the following amendments and remarks.



AMENDMENT TRANSMITTAL LETTER				Docket No. LOREAL 3.0-039	
Application No. 10/646,300	Filing Date August 22, 2003	Examiner L. M. Williams	Art Unit 1617		
Applicant(s): Hani Fares, Marc Cornell, Sidney Peter Foltis, and Isabelle Hansenne					
Invention: COMPOSITIONS CONTAINING TOPICAL ACTIVE AGENTS AND PENTYLENE GLYCOL					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	23	- 38 =		x	
Independent Claims	5	- 6 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>12-1095</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
<div style="text-align: center;"> Shawn P. Foley Attorney Reg. No.: 33,071</div>				Dated: <u>March 29, 2005</u>	
LERNER, DAVID, LITTENBERG, KRUMHOLZ & MENTLIK, LLP 600 South Avenue West Westfield, New Jersey 07090 (908) 518-6346					
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Dated: March 29, 2005		Signature:  (Shawn P. Foley)			